



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Mauro Fagnani, Albino Pidutti, Claudio Adragna

Title: DEVICE FOR THE CORRECTION OF THE POWER FACTOR
IN POWER SUPPLY UNITS WITH FORCED SWITCHING
OPERATING IN TRANSITION MODE

Serial No.: 10/633,321

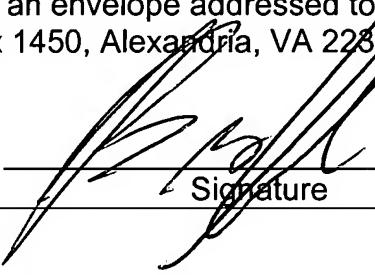
Filing Date: August 1, 2003

Examiner/Unit: Adolf D. Berhane / 2838

Attorney Docket No.: 2110-76-3

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited in the United States Postal Service as First Class Mail in an envelope addressed to: MS AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 9th day of February, 2005.


Signature

TRANSMITTAL LETTER

Transmitted herewith is:

A response/amendment in the above-identified application.

The fee has been calculated as shown below:

No additional claim fee is required.

Computation of Fee
For Claims as Amended

<u>Claims Remaining After Amendment</u>		<u>Highest Number Previously Paid for</u>	<u>Present Extra</u>	<u>Rate</u>	<u>Addl. Fee</u>
Total Claims	Minus	22	=	x <u>\$50/\$25</u> =	\$
Independent Claims	Minus	5	= 0	x <u>\$200/\$100</u> =	\$
Total additional fee for this amendment					\$

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously paid for" is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" is less than 3, write "3" in this space.

 Check No. _____ in the amount of \$_____ for the additional claim fee is enclosed.

XX As mentioned in the Amendment and Response, the Replacement Sheet of FIGS. 1 and 13 and the priority document of European Application No. 02425509.3 are enclosed.

 Charge \$_____ to Deposit Account No. _____. A copy of this sheet is enclosed.

XX Please charge any additional fees or credit overpayment to Deposit Account No. 07-1897.

Respectfully Submitted,

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